



# PUBLIC PASSENGER VEHICLE DRIVER'S LICENSE INFORMATION

OFFICE OF THE CITY CLERK LICENSE DIVISION  
200 E. WELLS ST. ROOM 105, MILWAUKEE, WI 53202  
(414) 286-2238 EMAIL: LICENSE @MILWAUKEE.GOV

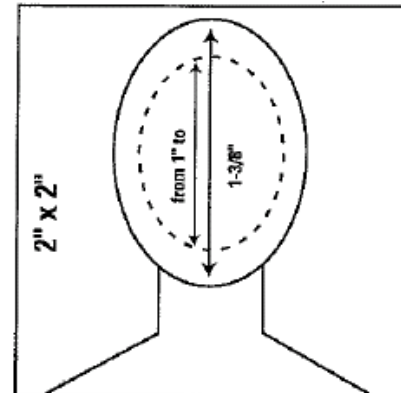
**LICENSE REQUIRED:** Every person driving a public passenger vehicle, except motorbuses operated by a transportation company, within the city must be licensed as such. Any person driving a vehicle used for the transportation of elderly or handicapped persons, regardless of whether the vehicle of such organization is licensed or otherwise regulated by the state of Wisconsin as a human service vehicle for the transportation of elderly or handicapped persons, shall be required to possess a Public Passenger Vehicle Driver's License.

**LICENSE PERIOD: BIENNIAL** New licenses granted in an odd year, expire on October 31 of the following odd year. New licenses granted in an even year, expire on October 31 of the following even numbered year. (For example if a new license is granted in 2002 it will expire October 31, 2004.) Renewal licenses will expire 2 years from the expiration date of the license being renewed.

**APPLICATION:** Return application to the License Division, City Hall, 200 East Wells Street, Room 105, Milwaukee, WI 53202. All applications must be notarized and include two recent photographs as shown.

## **POLAROID OR POLAROID TYPE PICTURES ARE NOT ACCEPTABLE.**

Any applications submitted without the appropriate fee, notarization or the two recent passport sized full-face photographs will not be accepted.



## **LICENSE FEE: (must be submitted with application)**

New: \$50.00      Renewal: \$35.00 (The application must be notarized. A \$.50 fee will be charged for applications notarized by the License Division.) Checks should be made payable to the City of Milwaukee.

**REFUNDS:** Must be applied for within one year of date of denial or non-issuance of your license. Please allow four to six weeks from the date of your request for processing.

**POLICE DEPARTMENT:** All new applicants whose fingerprints are not on file with the police department must report to the Police Administration Building between the hours of 6:00 AM AND 6:00 PM, 951 N. James Lovell Street (7<sup>th</sup> St), Room 305 to be fingerprinted. If you have previously been fingerprinted by the Milwaukee Police Department, call (414) 935-7281 to determine whether or not your fingerprints are still on file. *Renewal applicants do not need to be re-fingerprinted by the police department.* Once the Police Department completes the record check, a report will be sent to the license division. If the police department objects to the issuance of the license, the applicant must be scheduled before the Public Safety Committee, which makes a recommendation to the Common Council. (This process can take five to six weeks. Please note that no meetings are held during the month of August.)

**ISSUANCE:** If the police department does not object to the application and the other requirements have been complied with, the license will be issued and mailed to the applicant's home address listed on the application.

**DENIAL/REVOCATION:** If a license is denied by the Common Council due to a police record, no applicant can reapply within 12 months of the date of denial.

**REQUIREMENTS:**

- Applicants must be at least 18 years of age.
- Have a valid State of Wisconsin Motor Vehicle Driver's License, excluding an Occupational License.
- Applicants must successfully complete a Defensive Driving Course & pass a Public Passenger Vehicle Driver Test, which is given one hour prior to the Course. To register, call the Safety Commission at (414) 935-7990.
- **The defensive driving course is waived for non-motorized drivers; however, they are required to take and pass the Public Passenger Vehicle Test and provide proof to the License Division.**
- Drivers of Handicapped and Elderly vehicles shall also have successfully completed a training program in Passenger Assistance techniques conducted by one of the following qualified trainers:

Angel Acevedo  
Bell Therapy Day One  
4065 N. 35<sup>th</sup> St.  
Milwaukee, WI 53216  
414-445-2112  
414-445-5995 (FAX)

Larry Curie  
3353 N. 49<sup>th</sup> St.  
Milwaukee, WI 53216  
414-442-6559  
414-286-8938

Robert Hodnik  
Ameracare Transport  
355 E. Rosedale Street  
Milwaukee, WI 53207  
414-482-3113  
414-481-2588 (FAX)

Betty Atkins/Judy Wysocki  
Curative Care Network/Curative  
Transport Services  
1000 N. 92<sup>nd</sup> St.  
Milwaukee, WI 53226  
414-479-9420  
414-442-4270

Rose Craft  
Classroom Instructor  
Laidlaw Transit  
4524 S. 13<sup>th</sup> St.  
Milwaukee, WI 53221  
414-847-2747  
414-817-9865 (FAX)

Vincent Jackson  
Community Care Organization  
1555 S. Layton Blvd.  
Milwaukee, WI 53215  
414-385-6610 Ext. 343  
414-944-0000 (FAX)  
[vjackson@cco-cce.com](mailto:vjackson@cco-cce.com)

Karen L. Burris  
Training & Mgt. Systems  
P.O. Box 14066  
West Allis, WI 53214  
414-687-0640

Sonya Toney  
Transit Express  
424 W. Cherry St.  
Milwaukee, WI 53212  
414-264-7433 Ext. 237  
414-264-7460 (FAX)

Barbara Lumb  
Trainer – Transit Express Inc  
N15W24817 W Bluemound Rd  
Pewaukee, WI 53071  
262-650-1000  
262-650-1029 (FAX)

**Once an applicant completes the necessary courses, copies of the certificates must be submitted to the License Division either in person or by mail before your license will be issued. Renewal applicants need not submit evidence of course completion.**

ORDINANCES GOVERNING PUBLIC PASSENGER VEHICLE DRIVERS ARE LOCATED IN SECTIONS 100-54 OF THE MILWAUKEE CODE AND MAY BE VIEWED ONLINE <http://www.milwaukee.gov/ordinances>



**City  
of  
Milwaukee**

# PUBLIC PASSENGER VEHICLE DRIVER'S LICENSE APPLICATION

OFFICE OF THE CITY CLERK LICENSE DIVISION  
200 E. WELLS ST. ROOM 105, MILWAUKEE, WI 53202  
(414) 286-2238 E-MAIL ADDRESS: [LICENSE@MILWAUKEE.GOV](mailto:LICENSE@MILWAUKEE.GOV)

*Any incomplete application or application submitted without the required fee, notarization or photographs will be returned. Checks should be made payable to the City of Milwaukee. Return to above address.*

<b>Legal Name:</b>									
First Name			Middle Initial		Last Name			Suffix (Jr. Sr., etc.)	
List any other names by which you have been known on official records:									
Wisconsin Driver's License Number:									
Address:								Apt. #	
City							State		Zip Code
Home Phone #		(     )     -		Date of Birth:		Place of Birth:			
Height:		Weight:		Hair Color:		Eye Color:		Complexion:	
Prominent scars, marks, or tattoos on face, hands, or arms (explain) :									
Do you wear corrective lenses? Yes <input type="checkbox"/> No <input type="checkbox"/>					Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single				
Are you hearing impaired? Yes <input type="checkbox"/> No <input type="checkbox"/>									
Do you have any physical defects? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, list them:									
Have you ever been arrested for any reason? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, list date(s), charge(s) and penalties: _____ _____ _____ _____									
Has your driver's license ever been revoked/suspended? Yes <input type="checkbox"/> NO <input type="checkbox"/> If yes, list reason(s): _____ _____ _____									
Employing Company Name:									
Address:					Phone #: (     )     -				
If new applicant, have you ever been licensed as a Public Passenger Vehicle Driver? Yes <input type="checkbox"/> NO <input type="checkbox"/>									

OVER

**What type of vehicle will you be driving? Check below all that apply.**

NOTE: Course certificates for the required courses below must be provided by the applicant to the License Division prior to issuance of license.

☐ Taxi      ☐ Limo      ☐ Shuttle      ☐ Daycare      ☐ MOT

Require completion of: Driving Course and PPV Test

☐ Handicapped & Elderly

Requires completion of Driving Course, PPV Test and Passenger Assistance Techniques

☐ Horse & Surrey      ☐ Pedicab

Require completion of PPV test only

I have knowledge of the City ordinances currently regulating the license applied for herein and understand that the license may be subject to suspension, non-renewal or revocation if I violate any rule or regulation relating to public passenger vehicles.

SUBSCRIBED AND SWORN TO BEFORE ME THIS

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Notary Public, State of Wisconsin

My commission expires \_\_\_\_\_

**Office Use Only**

Initials \_\_\_\_\_ Filed \_\_\_\_\_ Issued \_\_\_\_\_ Grant \_\_\_\_\_

Horse & Surrey \_\_\_\_\_ Pedicab \_\_\_\_\_

Handicapped & Elderly \_\_\_\_\_

Taxi \_\_\_\_\_ Limo \_\_\_\_\_ Shuttle \_\_\_\_\_ Daycare \_\_\_\_\_ MOT \_\_\_\_\_

☐ Viewed WI DL # \_\_\_\_\_